

# ULTIMATE EQUITABLE OWNER INFORMATION

State Form 53271 (R / 6-07) / Form LB 2

## Explanation and Instructions

This form is to be completed by the *ultimate equitable owner* of the *applicant*. Before completing you should read and be familiar with the Indiana Loan Broker Act, codified in Indiana Code Chapter 23-2-5 and the rules relating to the Act which are contained in Indiana Administrative Code Chapter 710 IAC 1-22. You may access the statutes and rules through the Division's website: [www.sos.IN.gov/securities](http://www.sos.IN.gov/securities).

This properly completed form must be accompanied by:

- Original criminal background check report from each state in which the individual has resided or worked in the previous ten (10) years;
- Any additional documentation needed to answer questions.
- DO NOT include the instructions (pages 1-3 of this form).

**NOTE:** The license will not be issued until all required criminal background checks have been received and reviewed by the Indiana Secretary of State, Securities Division.

**A PERSON WHO KNOWINGLY FILES WITH THE COMMISSIONER ANY DOCUMENT OR STATEMENT THAT CONTAINS A FALSE REPRESENTATION OF A MATERIAL FACT IS SUBJECT TO THE LICENSE BEING DENIED, SUSPENDED, OR REVOKED; THE IMPOSITION OF A CIVIL PENALTY OF UP TO \$10,000 PER VIOLATION; AND CHARGED WITH A CLASS C FELONY WHICH IS PUNISHABLE BY A FINE UP TO \$10,000 PER VIOLATION AND UP TO EIGHT (8) YEARS OF IMPRISONMENT.**

If the space provided for any answer is inadequate, complete your answer on a separate sheet, specifying the question to which it relates and attach this sheet to the application. For each additional sheet you provide, sign and list the *applicant's* name.

Mail this properly completed form and any supporting documentation to the following address:

**Indiana Secretary of State  
Securities Division  
302 W. Washington St., Room E – 111  
Indianapolis, Indiana 46204**

To submit this properly completed form and any supporting documentation in person, deliver to the following address:

**Indiana Secretary of State  
Business Services Division  
302. W. Washington St., Room E – 018  
Indianapolis, Indiana 46204**

### A. GENERAL INSTRUCTIONS

1. **FILING** – An *Ultimate Equitable Owner* Information form (State Form 53271/Form LB 2) must accompany State Form 38168/Form LB 1, the Application for License as a Loan Broker. Each individual identified as an *ultimate equitable owner* for the *applicant* on Schedule A of State Form 38168/Form LB 1, must complete State Form 53271/Form LB 2. Additionally, *applicants* must update the roster of *ultimate equitable owners* on State Form 38168/Form LB1 by filing a Schedule B, thus requiring additional copies of State Form 53271/Form LB 2.
2. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases used throughout State Form 53271/Form LB 2.
3. **AMENDMENTS** – The *applicant* must notify the Secretary of State, Securities Division as required by Indiana Code § 23-2-5-10(i) of a change in any information contained in this form by submitting amendments using State Form 53271/Form LB 2 within two business days of the change. On State Form 53271/Form LB 2, complete the license number, check the Amendment box, complete Sections 1(A), 1(I), 7, and circle or otherwise identify the items being amended.
4. Completing this *Ultimate Equitable Owner* Information Form (State Form 53271/Form LB 2) does not authorize the individual to engage in *origination activities*. Each employee conducting *origination activities* must be registered with the Secretary of State, Securities Division by filing an Application for Registration as a *Principal Manager* or as an *Originator* (State Form 49718/Form LB 4).

## A. GENERAL INSTRUCTIONS CONTINUED

5. **PRINT OR TYPE:** Illegible or incomplete applications will be returned.
6. **Criminal Background Check:** Pursuant to Indiana Code § 23-2-5-5(k)(2) each of *applicant's ultimate equitable owners* must undergo a criminal background check. Each *ultimate equitable owner* must undergo a STATE BACKGROUND CHECK from EACH state in which they resided or worked during the previous ten (10) years. If the *ultimate equitable owner* is a non-individual, then the following rules for criminal background checks apply depending on the type of entity.
  - **Corporation** – all individuals owning ten percent (10%) or more of the **Corporation's** equity must undergo a criminal background check.
  - **Partnership** – all partners must undergo a criminal background check.
  - **L.L.C.** – all members must undergo a criminal background check.

If a non-individual owns ten percent (10%) or more of that Corporation's equity, is a partner in that Partnership, or is a member of that L.L.C., then the same rules for criminal background checks apply for those non-individuals. These rules apply for every level of ownership until only individuals remain.

**Ultimate Equitable Owner, whose residence or place of business is located in Indiana:** Complete the following steps:

1. Print the Request for Limited Adult Criminal History Information (State Form 8053) and complete the "Review Challenge" portion (this form may be printed from Indiana State Police's website: <http://www.in.gov/isp/LCHrequest.pdf>);
2. Obtain a complete set of fingerprints from your local law enforcement agency;
3. Mail the properly completed Request for Limited Adult Criminal History Information, fingerprint card, and \$10 certified check or money order, payable to the State of Indiana to the following address:

**Indiana State Police, Criminal History Limited Check**

Records Division

P.O. Box 6188

Indianapolis, Indiana 46206-6188

4. Mail the original Review Challenge report along with this properly completed Ultimate Equitable Owner Information form (State Form 53271/LB 2) to the Indiana Secretary of State, Securities Division.

**Ultimate Equitable Owner, whose residence or place of business is located Out-of-State:** If your workplace or your place of residence has been located outside Indiana anytime during the previous ten (10) years, you must undergo a state criminal background check from the law enforcement department in **each state in which you have resided or worked**. Contact the state police department for information on how to obtain a criminal background check in your state. Submit the original criminal history report along with this properly completed Ultimate Equitable Owner Information form (State Form 53271/LB 2) to the Indiana Secretary of State, Securities Division.

## B. SECTION INSTRUCTIONS

### SECTION 1 – ULTIMATE EQUITABLE OWNER'S IDENTIFYING INFORMATION

Complete each line.

### SECTION 2 – RESIDENTIAL HISTORY

Starting with your current address (Section 1(K)) list all addresses where you have resided within the past ten (10) years. (Attach additional sheets as necessary.) Post Office Boxes are not acceptable. Report changes as they occur.

### SECTION 3 – EMPLOYMENT HISTORY

Provide complete employment history for the past ten (10) years. All entries must include the beginning and end dates of employment. Provide the full legal name of the company, beginning with your current employer. Account for all time including full & part-time employments, self-employment, military service, and homemaking. Also include periods such as unemployment, full-time student, extended travel, etc. For the purposes of this history, include both 1099 independent contractor assignments as well as W-2 status employment. Indicate by "YES" or "NO" whether this employment was *financial service-related* business. (Attach additional sheets as needed.)

### SECTION 5 - DISCLOSURES

Questions must be answered fully, and must include all actions or legal proceedings occurring in any court in any jurisdiction. If the answer to any of the questions is "YES", provide complete details of all events or proceedings in an attachment, listing the offense, cause number, date of conviction, and the court in which the individual was convicted. Refer to the explanation of terms section of the instructions for explanations of italicized terms.

## SECTION 6 – LOAN BROKER VERIFICATION

This section must be completed by an authorized representative of the *applicant* and must include original manual signature.

## SECTION 7 – ULTIMATE EQUITABLE OWNER VERIFICATION

By signing the verification, the *ultimate equitable owner* is affirming that the application is true and complete, that he/she has not been convicted of a *felony* within the previous five (5) years or a crime of fraud or deceit within the previous ten (10) years. If the *ultimate equitable owner* has been convicted of a *felony* within the previous five (5) years or a crime of fraud or deceit in the previous ten (10) years, this information must be disclosed by attaching additional pages listing the offense, cause number, date of conviction, and the court in which the individual was convicted. The Commissioner *may* deny a license based on this information.

**C. EXPLANATION OF TERMS** – The following italicized terms are used throughout State Form 53271/Form LB 2 and have the following meaning.

### 1. GENERAL

**APPLICANT** – The loan broker applying on or amending information on State Form 38268/Form LB 1 (including schedules) or State Form/Form LB 3. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

**CONTROL** – The power, directly or indirectly, to direct the management or policies of an entity, whether through ownership of securities, by contract, or otherwise. Any *person* that (1) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; (2) in the case of an LLC, Managing Member; or (3) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

**JURISDICTION** – A state, the District of Columbia, the Commonwealth of Puerto Rico, any territory of the United States, or any subdivision or regulatory body thereof.

**ORIGINATOR** – A *person* engaged in *origination activities*.

**ORINATION ACTIVITIES** – Communication with or assistance of a borrower or prospective borrower in the selection of loan products or terms.

**PERSON** – An individual, a partnership, a trust, a corporation, a limited liability company, a limited liability partnership, a sole proprietorship, a joint venture, a joint stock company, or another group or entity, however organized.

**PRINCIPAL MANAGER** – The individual responsible for the supervision and management of the employees and business affairs of the licensee at a specific office location.

**ULTIMATE EQUITABLE OWNER** – A *person* who, directly or indirectly, owns or controls ten percent (10%) or more of the equity interest in a loan broker licensed or required to be licensed under Indiana Code 23-2-5, regardless of whether the *person* owns or controls the equity interest through one (1) or more other *persons* or one (1) or more proxies, powers of attorney, contracts, or other arrangements.

### 2. FOR THE PURPOSE OF SECTION 5

**CHARGED** – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

**ENJOINED** – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

**FELONY** – A *felony* is an offense punishable by a sentence of at least one (1) year imprisonment and/or a fine of at least \$1,000.

**FINANCIAL SERVICES OR FINANCIAL SERVICES-RELATED** – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to; acting as or being associated with a bank or savings association, credit union, mortgage lender, loan broker, real estate salesperson or agent, closing agent, title company, or escrow agent).

**FOREIGN FINANCIAL REGULATORY AUTHORITY** – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

**FOUND** – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

**INVOLVED** – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

**MISDEMEANOR** – A *misdemeanor* is an offense punishable by a sentence of less than one (1) year imprisonment and/or a fine of less than \$1,000.

**ORDER** – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

**PROCEEDING** – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).



**ULTIMATE EQUITABLE  
OWNER INFORMATION**  
State Form 53271 (R / 6-07) / Form LB 2

Todd Rokita  
Indiana Secretary of State  
Securities Division  
302. W. Washington Street, E-111  
Indianapolis, Indiana 46204  
(317) 232-6681

Date (MM/DD/YYYY):				
License Number Information (if applicable). Use additional sheets if necessary.	License #	Jurisdiction	License #	Jurisdiction
	License #	Jurisdiction	License #	Jurisdiction
<input type="checkbox"/> INITIAL FORM		<input type="checkbox"/> AMENDMENT <i>To amend, circle or identify item(s) being amended</i>		

<b>1. ULTIMATE EQUITABLE OWNER'S IDENTIFYING INFORMATION:</b>				
(A)				
Last Name		First Name		Middle Name
				Suffix
(B) Social Security Number		(C) Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		
(D) Date of Birth (MM/DD/YYYY)		(E) State/Province of Birth		(F) Country of Birth
(G) List all names(s) , other than your legal name, you have used or are using, or by which you are or were known since the age of 18. This field should include for example, nicknames, aliases, and names used before or after marriage. <i>(Use additional sheets as necessary).</i>				
Name		Name		Name
(H) <b>For amendments only:</b> If this filing reports that an individual's name has changed, enter the new name and attach supporting legal documentation:				
Last Name		First Name		Middle Name
				Suffix
(I) Employer Name <i>(Loan Broker)</i>				
(J) Office of Employment Address <i>(do not use a P.O. Box):</i> <input type="checkbox"/> If this address is your private residence, check this box.				
Number & Street:		City:		State/Province or Country:
				Zip +4/Postal Code:
(K) Current Residence address <i>(if different from employment address):</i>				
Number & Street:		City:		State/Province or Country:
				Zip +4/Postal Code:
(L) Telephone Numbers and e-mail address:				
Business Phone		Cell Phone <i>(optional)</i>		Fax line <i>(optional)</i>
				E-mail address

**REST OF PAGE INTENTIONALLY LEFT BLANK**

Applicant full legal name: \_\_\_\_\_

Individual's full legal name: \_\_\_\_\_

**2. RESIDENTIAL HISTORY:**

From (MM/YYYY)	To (MM/YYYY)	Street Address	City	State or Province	Zip + 4 Postal Code	Country

**3. EMPLOYMENT HISTORY:**

From (MM/YYYY)	To (MM/YYYY)	Employer (company name)	Position Held	City	State or Province	Country	YES or NO?

**4. Other Business:** Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (Please exclude non-financial services-related activity that is exclusively charitable, civic, religious, or fraternal and is recognized as tax exempt.) If YES, provide the following details: the name of the other business; whether the business is *financial services-related*; the address of the other business; the nature of the other business; your position, title, or relationship with the other business; the start date of your relationship; the approximate number of hours per month you devote to the other business; and briefly describe your duties relating to the other business. (Attach additional sheets as needed.)

**YES**  
☐
**NO**  
☐
**Details:**

Applicant full legal name: \_\_\_\_\_ Individual's full legal name: \_\_\_\_\_

<b>5. DISCLOSURES:</b>		
<b>Financial Disclosure</b>	<b>YES</b>	<b>NO</b>
<b>(A) Within the past ten (10) years:</b>		
(1) have you filed a personal bankruptcy petition or been the subject of an involuntary bankruptcy petition?	<input type="checkbox"/>	<input type="checkbox"/>
(2) based upon events that occurred while you exercised <i>control</i> over any organization, have any filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(B) Has a bonding company ever denied, paid out on, or revoked a bond for you?</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>(C) Do you have any unsatisfied judgments or liens against you?</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Criminal Disclosure</b>	<b>YES</b>	<b>NO</b>
<b>(D) Have you ever within the past five (5) years:</b>		
(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
(2) been <i>charged</i> with any <i>felony</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(E) Based upon activities that occurred while you exercised <i>control</i> over it, has any organization ever within the past five (5) years:</b>		
(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
(2) been <i>charged</i> with any <i>felony</i> ?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(F)</b>		
(1) Within the past ten (10) years have you ever been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a crime <i>involving: financial services</i> or a <i>financial services-related</i> business; any fraud, false statements, or omissions; any theft or wrongful taking of property; bribery; perjury; forgery; counterfeiting; extortion; or a conspiracy to commit any of these offenses?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are there pending charges against you for a crime as described in 5(F)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(G) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:</b>		
(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a crime specified in 5(F)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
(2) been <i>charged</i> with a crime specified in 5(F)(1)?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Regulatory Action Disclosure</b>	<b>YES</b>	<b>NO</b>
<b>(H) Has any State or federal regulatory agency or <i>foreign financial regulatory authority</i> ever:</b>		
(1) <i>found</i> you to have made a false statement or omission or been dishonest, unfair or unethical?	<input type="checkbox"/>	<input type="checkbox"/>
(2) <i>found</i> you to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)?	<input type="checkbox"/>	<input type="checkbox"/>
(3) <i>found</i> you to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted?	<input type="checkbox"/>	<input type="checkbox"/>
(4) entered an <i>order</i> against you in connection with a <i>financial services-related</i> activity?	<input type="checkbox"/>	<input type="checkbox"/>
(5) denied, suspended, or revoked your registration or license, disciplined you, or otherwise by <i>order</i> , prevented you from associating with a <i>financial services-related</i> business or restricted your activities?	<input type="checkbox"/>	<input type="checkbox"/>
(6) barred you from association with an entity regulated by such commission, authority, agency, or officer, or from engaging in a <i>financial services-related</i> business?	<input type="checkbox"/>	<input type="checkbox"/>
(7) issued a final <i>order</i> based on violations of any law or regulations that prohibit fraudulent, manipulative, or deceptive conduct?	<input type="checkbox"/>	<input type="checkbox"/>
<b>(I) Are you now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 5(H)?</b>	<input type="checkbox"/>	<input type="checkbox"/>

Applicant full legal name: \_\_\_\_\_ Individual's full legal name: \_\_\_\_\_

Civil Judicial Disclosure		YES	NO
(J)			
(1) Has any domestic or foreign court ever:		<input type="checkbox"/>	<input type="checkbox"/>
(a) <i>enjoined</i> you in connection with any <i>financial services-related</i> activity?		<input type="checkbox"/>	<input type="checkbox"/>
(b) <i>found</i> that you were <i>involved</i> in a violation of any <i>financial services-related</i> statute(s) or regulation(s)?		<input type="checkbox"/>	<input type="checkbox"/>
(c) dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against you by a state, federal, or <i>foreign financial regulatory authority</i> ?		<input type="checkbox"/>	<input type="checkbox"/>
(2) Are you named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 5(J)(1)?		<input type="checkbox"/>	<input type="checkbox"/>
Customer Arbitration/Civil Litigation Disclosure		YES	NO
(K) Have you ever been named as a respondent/defendant in a <i>financial services-related</i> consumer-initiated arbitration or civil litigation which:			
(1) is still pending; or		<input type="checkbox"/>	<input type="checkbox"/>
(2) resulted in an arbitration award or civil judgment against you, regardless of amount, or that required corrective action; or		<input type="checkbox"/>	<input type="checkbox"/>
(3) was settled for any amount?		<input type="checkbox"/>	<input type="checkbox"/>

#### 6. LOAN BROKER VERIFICATION:

To the best of my knowledge and belief, the person completing this form is an *ultimate equitable owner* at the time of approval. I have taken appropriate steps to verify the accuracy and completeness of the information contained herein and with this application. I have provided the *ultimate equitable owner* the opportunity to review the information contained herein and the *ultimate equitable owner* has approved this information and signed the verification in Section 7 of this form.

Company Name	Signature of authorized party	Print Name and Title of authorized party
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**Loan Broker Verification must always be completed in full with original, manual signature.**

#### 7. ULTIMATE EQUITABLE OWNER VERIFICATION:

I, \_\_\_\_\_, do solemnly swear or affirm that:

A. I have not been convicted in any *jurisdiction* of a *felony* within the previous five (5) years or a crime involving fraud or deceit in the previous ten (10) years other than which is disclosed on the attached documents; and

B. The information appearing in this form and the attached documents hereto is true, accurate, and complete to the best of my knowledge.

Signature	
Title	Date (MM/DD/YYYY)

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